

United States
Department of
Agriculture

Office of the General Counsel Pacific Region
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## FAX TRANSMITTAL COVER

Date: 03/21/07

To: Division of Water Rights

State Water Resources Control Board

P.O. Box 2000, Sacramento, CA 95812-2000

Attn: Jane Farwell Fax: (916) 341-5400

NUMBER OF PAGES (including cover): 3

From: Joshua S. Rider, Staff Attorney

**USDA-OGC** 

RE: "Santa Ana River Hearing"

COMMENTS: Thank you for your help. Attached please find my cover letter and Notice of Intent to Appear.

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March 21, 2007

Division of Water Rights State Water Resources Control Board P.O. Box 2000, Sacramento, CA 95812-2000

Attn: Jane Farwell Phone: (916) 341-5349 Fax: (916) 341-5400

Email: wrhearing@waterboards.ca.gov

Subject:

"Santa Ana River Hearing"

Dear Ms. Farwell:

Attached please find a Notice of Intent to Appear submitted on behalf of my client agency the United States Department of Agriculture, Forest Service. While the Forest Service does not anticipate calling any witnesses, or presenting evidence, opening statements, cross examination, rebuttal, and closing statements and legal arguments may be offered on behalf of my client.

We have made note of the Pre-hearing Status Conference scheduled for Thursday, April 5<sup>th</sup>, 2007, and will be in attendance. Should anything further be required, I may be reached through any of the avenues noted at the head of this correspondence.

Respectfully Submitted,

Joshua S. Rider

Attorney for the Forest Service

## NOTICE OF INTENT TO APPEAR

forest Service, USDA plans to participate in the water right hearing regarding: (name of party or participant)

	SANTA ANA RIVER HEARING scheduled to commence Wednesday, May 2, 2007		
■ I/we intend to partic Applications 31165 □ I/we intend to partic □ I/we intend to partic ■ I/we agree to accept	Wastewater Change Petition WW-0045. Sipate in the portion of the hearing regarding i, 31370, 31174, 31369, 31371 and 31372. Sent a policy statement only. Sipate by cross-examination or rebuttal only. It electronic service of hearing-related mater following witnesses to testify at the hearing.	ials.	
NAME	SUBJECT OF PROPOSED TESTIMONY (Please indicate Application Number if Appropriate)	ESTIMATED LENGTH OF DIRECT TESTIMONY	EXPERT WITNESS (YES/NO)
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(If more space is requ	red, please add additional pages or use rev	erse side )	
	imber and Fax Number of Attorney or Other Represe	-	
Signature: Johns	b. R. Dated: 3	3/21/7	
Name (Print): Joshua	S. Rider		
Mailing: 33 New I	Contgomery, 17th Floor		
	ncisco, CA 94105		
Phone Number: (415) 744-3011 Fax Number: (415) 744-3170			
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